

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Courtney for Congress

A. Full Name (Last, First, Middle Initial) Brian Wilson			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>03</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	08		03		2014
M M M	/	D D D	/	Y Y Y Y Y										
08		03		2014										
Mailing Address 75 Eastern Point Road			Transaction ID : C20850182											
City Groton	State CT	Zip Code 06340	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">500.00</td> </tr> </table>		500.00									
500.00														
FEC ID number of contributing federal political committee. C														
Name of Employer Electric Boat		Occupation Manager												
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">750.00</td> </tr> </table>			750.00									
750.00														
B. Full Name (Last, First, Middle Initial) Ann E Withey			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>08</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	08		08		2014
M M M	/	D D D	/	Y Y Y Y Y										
08		08		2014										
Mailing Address 314 Station Rd			Transaction ID : C20849453											
City Hampton	State CT	Zip Code 06247	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">250.00</td> </tr> </table>		250.00									
250.00														
FEC ID number of contributing federal political committee. C														
Name of Employer Annie's Inc		Occupation Farmer												
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">250.00</td> </tr> </table>			250.00									
250.00														
C. Full Name (Last, First, Middle Initial) Steven Wolfson MD			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>17</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	09		17		2014
M M M	/	D D D	/	Y Y Y Y Y										
09		17		2014										
Mailing Address 1 Moose Hill Rd			Transaction ID : C20917775											
City Guilford	State CT	Zip Code 06437-2396	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">75.00</td> </tr> </table>		75.00									
75.00														
FEC ID number of contributing federal political committee. C														
Name of Employer Yale school of medicine		Occupation Physician												
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5">300.00</td> </tr> </table>			300.00									
300.00														
SUBTOTAL of Receipts This Page (optional).....			<table border="1"> <tr> <td colspan="5">825.00</td> </tr> </table>		825.00									
825.00														
TOTAL This Period (last page this line number only).....			<table border="1"> <tr> <td colspan="5"></td> </tr> </table>											